

Car collection/Delivery inspection report

Collection Date: Time: Delivery Date: Time:

Collection / Dispatcher
Details:

Name:
Address:

Postcode:
Contact number:

Transporter Details:

Name:
Address:

Postcode:
Contact number:
Email:

Destination recipient:

Name:
Address:

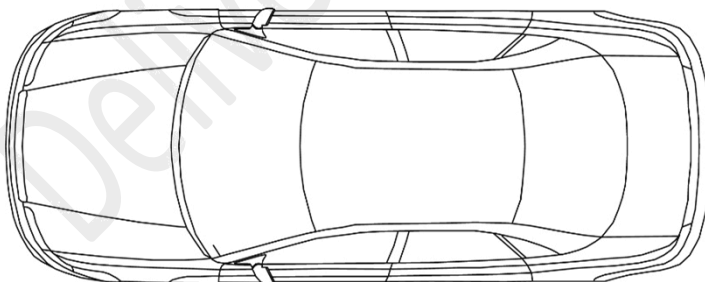
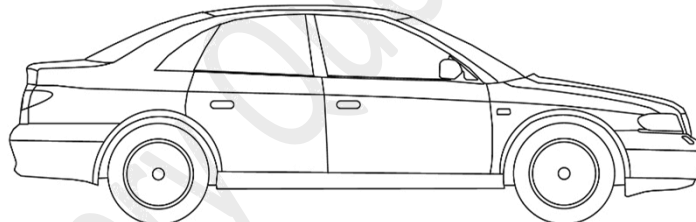
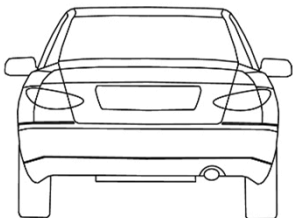
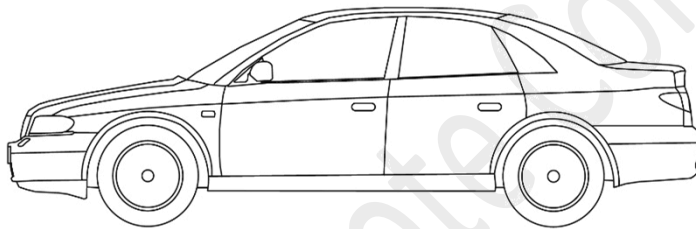
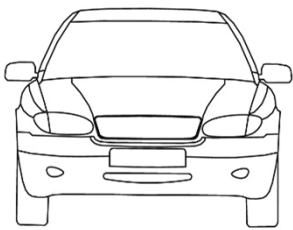
Postcode:
Contact number:
Email:

Vehicle details:

Make: Model: Colour: Registration:

VIN: Mileage:

Circle defects and label with appropriate code



Key:

SC	Scratch
DSC	Deep Scratch
DT	Dent
CH	Chip
DF	Deformed
RU	Rust
GD	Glass damage
TD	Tyre damage
WD	Wheel Damage

Notes:

Take pictures or add further notes on the back of this form

Collection extras: if applicable

Keys: Y / N sets.....

V5 or new owner slip: Y / N

Handbook: Y / N

Collection / Dispatcher

Name:
Signature:

Date:

Transporter

Name:
Signature:

Date:

Destination recipient

Name:
Signature:

Date: